# Executive Committee
# Summary of Meeting Minutes
# August 24, 2017

| EXECUTIVE COMMITTEE MEMBERS | DEPARTMENT OF HUMAN SERVICES |
|---|---|
| Gerd Clabaugh – **present** | Jerry Foxhoven - |
| David Hudson – **present** | Mikki Stier - **present** |
| Dennis Tibben – **present** | Deb Johnson - |
| Natalie Ginty – **present** | Liz Matney - **present** |
| Shelly Chandler – **present** | Matt Highland - **present** |
| Cindy Baddeloo (Brandon) – **present** | Lindsay Paulson - **present** |
| Kate Gainer – | Sean Bagniewski - **present** |
| Lori Allen – | Amy McCoy - |
| Richard Crouch – **present** | Luisito Cabrera - **present** |
| Julie Fugenschuh – **present** | Alisha Timmerman - **present** |
| Jodi Tomlonovic – **present** | |

## Introduction
David called the meeting to order and performed the roll call. Executive Committee attendance is as reflected above and quorum met.

## Approval of the Executive Committee Meeting Minutes of July 11, 2017
Minutes of the Executive Committee meeting on July 11, 2017 was approved.

## Discussions on Recommendations
Dave suggested that there be fewer recommendations with a more clearly articulated rationale compared to the last set of recommendations. The Executive Committee agreed that previous recommendations that had been declined by Director Foxhoven were to be further reviewed by the recommendations subcommittee for future recommendation consideration. The Full Council minutes from the August 8, 2017, meeting was reviewed and the nine Council recommendations discussed. The MAAC would review the LTSS Ombudsman's reports and work with the Long Term Care Ombudsman's Office for potential recommendations. The subcommittee will consist of Dennis Tibben, Natalie Ginty, Julie Fugenschuh, Jodi Tomlonovic, Gerd Clabaugh, and David Hudson.

### Subcommittee Topics for Recommendations
1. Review declined recommendations from Quarter 2 SFY2017 and Quarter 3 SFY2017
2. Review Durable Medical Equipment issues
3. Review input from the LTC Ombudsman's Office reports to identify persistent issues

## LTC Ombudsman "How to be Your Own Best Advocate"
Kelli reviewed the "How to Be Your Own Best Advocate" guidebook. She stated that the goal of the Document is to inform managed care members how to file appeals and grievance forms and better understand CDAC and Case Management processes. She stated that the document is available

electronically through the State LTCO Office website.

## Provider Re-Enrollment Update

Sean confirmed that of the 38,029 provider tax IDs, 9,868 have not yet re-enrolled. Of the 9,868 providers that have not re-enrolled, 5,600 have not billed the IME or the MCOs this year. He stated that of the 9,868 providers, there are 4,266 who have billed the IME or MCOs this year. Those who have not billed the IME or MCOs this year will be sent a letter informing them that they must re-enroll with the IME by September 30, 2017, or will be disenrolled with the IME and MCOs. In addition to the written document, they will receive a phone call from either the IME or MCOs. Providers who have billed the IME or MCOs this year will receive notice via email that they must re-enroll with the IME by October 31, 2017.

## Medicaid Director's Update

*(Including review of Action Items document)*

Mikki reviewed the outstanding items in the Action Items document. Liz Matney addressed the Action Items below. Further information and data will be provided at the September 12, 2017, Executive Committee meeting.

**Top Five Reasons for Grievances and Appeals to Identify Systemic Trends:**

**Grievances**

Liz stated the top three grievances are concerning transportation, provider issues, and eligibility. There was less than 1/10 of 1% of members filing grievances given each member contacted their MCO once. All calls to the IME regarding concerns that could be classified as grievances continue to be tracked and addressed by the IME and the MCOs.

**Appeals**

Liz stated that the top reasons for appeals are issues with prescriptions and service authorizations. There had been 13 member appeals regarding prescriptions and approximately 79 appeals regarding service authorizations that were escalated to the state fair hearing level since implementation of the program. The most common reason for appeal denials at the state fair hearing level was that the member had not gone through their MCO's appeals process prior to filing an appeal with Iowa Medicaid.

**Identifying Trends Involving Payment Issues:** Liz confirmed the number of reported provider payment issues had decreased following implementation. The most prevalent payment issues are due to the process of how the rate files are loaded into the system, discrepancies in rate files due to incorrect provider type classification, changes in member eligibility, and delays in MCO credentialing. The top reason for provider calls to MCO call centers was verification of claim status.

**Average Aggregate Cost Per Member Per Day for Special Needs Members in ICF/ID:** Liz confirmed that the average cost per member per day for members residing in community-based ICF/IDs in the state is approximately $325. The average daily cost for members in out-of-state ICF/IDs is approximately $336 per member. The average daily cost is approximately $869 per member for those residing in state resource centers.

**Out-of-State Placement for Members in Facilities:** Liz stated the Department attempts to place members in the state, close to their supports and family members, and require exhaustion of in-state facility placement options prior to considering out-of-state placement. Liz confirmed there are currently 11 members residing in bordering states. There are currently 18 members placed out-of-state due to their medical conditions; with a large portion being children residing in Psychiatric Medical Institutes for Children (PMIC) facilities. Liz stated that there were currently 112 members placed in an out-of-state facility due to reasons such as the member having severe aggression or failure at other in-state facilities.

## Open Discussion

David solicited comments. No comments were made.

## Adjourn

4:33 P.M.